BOSTON UNIVERSITY
SCHOOL OF SOCIAL WORK

THE USE OF GROUP WORK SERVICES BY CASE WORKERS IN SELECTED BOSTON AGENCIES

A Thesis

Submitted by

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CHAPTER I

INTRODUCTION

In attempting to meet the problems of the individual's adjustment to his social environment, the field of social case work has at various times reached out for the knowledge and skills of other fields. Recently there has developed an awareness on the part of case workers of the possibilities for the use of group work experience in the treatment of their clients.

Purpose

The study was undertaken with the aim of investigating some uses which case workers are making of group work services in a city where the movement for case work - group work cooperation is in its infancy. Some of the questions it seeks to answer are:

> What are some specific contributions that group work makes to individual adjustment?
>
> What are some of the types of individual and social problems in which the case worker uses group work as a resource?
>
> What are the patterns of relationships in their joint efforts at treatment of the individual?

Scope

The cases under study, twenty in number, were selected from the active and inactive files of four agencies having case work as the whole or part of its function. Five

cases were chosen from each agency. These agencies are of private sponsorship and represent three types of case work.

I. The Boston Provident Association: offering case work service and financial assistance if necessary to people in Boston with personal or family problems. It further provides a Homemaker Service to care for children during illness of the mother. It acts as an agent for several other charitable societies. This agency at present maintains two offices, one in downtown Boston, serving all of Boston and another in South Boston. It serves over one thousand families a year.

II. The Family Society (South End District): offering a case work counselling service on personal and family problems. For this service it maintains fourteen district offices in Greater Boston. It sponsors a Vocational Counselling Service . It serves about forty-five hundred families annually.

III. The Habit Clinic for Child Guidance: offering psychiatric and case work service to children with emotional problems. Staff consists of psychiatrist, psychologist and psychiatric social worker who work with the child and family to effect adjustment. Children are usually referred to the Clinic by schools, social agencies or are brought in by parents. It serves the Metropolitan and Greater Boston community.

IV. The Children's Hospital Social Service Department: co-operates with the doctors and other personnel of the Children's Hospital in helping make medical care more effective for the infants and children treated in the wards and clinics of the hospital. It offers case work service to those patients and families who need this help. It serves on a referral basis two thousand individuals a year.

Selection of Cases

The number of cases selected from each agency represents a small fraction of its current case load. The study then cannot be regarded in any way as being quantitative. The twenty cases were studied for their qualitative content regarding the use of group work. The data selected is the result of purposive selection. The cases were selected by the supervisor, or senior case worker in each agency who recalled the cases on the basis of their cooperative work with a group work agency. Due to the fact that the activity in some of the cases dated back several years, no attempt was made by the writer to contact the group work agencies involved. All the material presented has been abstracted from the case workers' records. This information plus information given the writer by the case workers who selected the cases provides the subject matter for the discussion.

In reference to the question of selection of cases, it must be noted that several case workers with whom the writer

talked affirmed the fact that much of what could be termed "casual referral" to group work agencies prevails. This type of referral is made rather routinely by the case workers whenever possible. It is "casual" in that the fact that it was made may never be included in the case record. The case records studied are rather unusual in that they contained substantial data, expressions and observations regarding the clients' group work experience.

Before proceding to the presentation of the data, the writer believes that a survey of the developmental aspects of case work, group work and the movement for case work - group work cooperation will assist in analysing and evaluating the content of the cases.

CHAPTER II

BACKGROUND OF CASE WORK - GROUP WORK COOPERATION

I. Common Origins

It has been noted that case work and group work have a common origin.[1] Both were born of the efforts of individuals who, during the last century, extended a helping hand to a mass of people in need. Early social workers, in their zeal to effect some corrective force on the social ills, worked with people whose needs were of a social and personal nature. As the movement gained impetus a process of differentiation developed among those who rendered service. Some devoted all their energies to the establishing of centers where the individual found resources for recreation, education and social action. Others still, devoted their attention to helping individuals with their problems of finances and family tensions. The latter section became known as case workers and developed rapidly toward a distinct professional field having a basic body of knowledge, method, skills and objectives. Those who worked with people in groups were somewhat slower in arriving at a consciousness of unity regarding their objectives and method. The concept of generic case work was established at

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1 Gertrude Wilson, Group Work and Case Work, Their Relationship and Practice (New York, N.Y. Family Welfare Association of America, 1941) p. 1.

the Milford Conference and has been instrumental in the development of an extensive, mature science in the giving of service on an individual basis. The concept of generic group work has only recently come to the fore, and it is only within the past few years that group work has come to be regarded as a field of social work.

II. Emergence of Group Work Process

The year 1935, may be considered a milestone in the development process of the field of group work. It was at this time that group work seemed to be given acceptance as a method of social work. In this year, the Social Work Year Book first included a description of social group work. In this year too, was organized the group work section of the National Conference of Social Work. In the Year Book, the field of "Social Group Work" was described as consisting of the national agencies that concerned themselves with activities of a character building nature. It also intimated that there existed a number of practitioners of group work whose main concern was with working out individual adjustment through small groups.

It is significant that two of the papers delivered in the group work section of the National Conference dealt with the theme of the integration of case work and group work. It was proposed that with the maturation of the fields of case work and group work, the time had come to consider the theoretical and practical aspects of integrating the two into one

whole. One of the proponents of integration, Mr. Roy Sorenson, based his proposals on the specific developments in group work which in his opinion fitted it for partnership with case work. These developments were 1) that the trend in group work agencies was toward individualization in their program; 2) that group workers were becomming more sensitive to the uniqueness of the individual personality; and 3) that group workers now had a greater understanding and awareness of the social and family history of the members in their groups. These trends represented the awareness of workers employed by national program agencies and settlements of the potentialities of the group work process as a method of developing the individual's personal growth and social adjustment.

III. Case Work - Group Work Cooperation

The period that saw the development and formulation of a generic group work concept also saw the beginning of a movement for case work - group work cooperation. Throughout the major cities of the country there were organized committees for the study of this subject. Many of these committees were sponsored by local social planning bodies. Other projects in case work - group work cooperation were embarked upon by individual agencies or groups of agencies. All these groups had as their object the exploring of the similarities and differences of the two fields and the experimenting in working relationships. Each study committee developed its own approach to

the problem. By 1941, there were in existence committees at work on this subject in forty-one major cities. Some of the committees never advanced beyond the exploratory stage of the question. Others worked out methods and procedures to be followed in making referrals either way. Some set up and carried through notable experiments which tested the workableness of the idea of cooperation. Two of the more notable of these experiments were carried out in Cleveland and in New York.

In Cleveland, a Joint Committee of Case Work and Group Work of the Welfare Federation set up four experimental groups each one located in a separate group work agency. A case worker and a group worker were assigned to each group. The members in these groups included children with all types of major behavior difficulties. The group worker worked in his usual manner. The case worker was left to observe the group by whatever method he could devise. Records were kept by both workers. The project continued for one year at which time the records were analyzed. Two of the workers, one a case worker and the other a group worker, wrote later that in cooperating on this project they had gained

> the recognition that case workers and group workers have common objectives and are working toward the same end. Both are attempting to help people to the most satisfactory personal and social adjustment. We are on common ground in that we are serving the same communities and many of the same kinds of people in them. And since this is true that we make a more significant contribution if we work

together than if we work independently of each other.[2] The "Pairs" Experiment[3] was organized by the Case Work - Group Work Committee of the Welfare Council of New York City. The objective of this committee was to set up an experiment to study the requisites of a working relationship between a case work agency and a group work agency in the matter of referral. Twelve pairs were organized, each one comprising a case worker and a group worker. In this experiment the case worker was not brought into the actual group situation. The focus of attention was in each worker rendering his special service on the same case. The case worker referred the client to the group worker. Each worker worked with the client and kept a separate record of her contact. Periodically joint conferences were held to consider attendance of client at group work activities, financial difficulties, adjustment of the program.

Apart from the value of bringing case workers and group workers in contact with each other the values that accrued from this experiment are in the establishing of specific

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2 Mary Hester & Dorothy Good Thomas, "Case Work - Group Work Cooperation," Proceedings of the National Council of Social Work, 1939, p. 339.

3 Committee on Group Work - Case Work Relationships, Welfare Council of New York City, The "Pairs" Experiment, 1940.

criteria pertaining to making effective referrals from case work to group work agencies.

Another pattern of case work - group work cooperation has been in the area of both fields experimenting with each other's method. In the field of case work it has involved the organization of play groups sponsored by and meeting in the facilities of the case work agency. This is not a very extensive movement but it has been attempted by several case work agencies. An experiment of this type was begun by the Gramercy district offices of the New York Community Service Society in 1942.*

In group work there has developed a rather extensive movement for the inclusion of a case worker on group work agency staffs. The aim of this movement was to provide case work service to members and to offer case work consultation for the group workers.

This pattern of cooperation however has aroused concern on the part of some group workers who feel that the crux of cooperation is working together harmoniously on matters such as referral or joint treatment. Regarding the use of case workers, Miss Gertrude Wilson emphasises that

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*For an interesting account of this experiment see article, "Group Work in a Case Work Setting," by Jean Wren. The Group, Vol. 8 - No. 1 (American Association for the Study of Group Work, Nov. 1945) pp. 8 - 11.

> There is in the minds of many, considerable question of the use of case workers in this capacity; and even if he (the case worker) is able to make astute observation in three or four visits (to a group), there is more doubt as to the group worker's ability to use the case worker's observations if he is not sufficiently sensitive to make the observations himself. Every social worker should be able to use the resources of other agencies in the community, hence every worker should be able to carry out the referral from his agency to another. If workers are not so equipped, would it not be a better policy to teach them to be so than to import an outside worker for this part of the group worker's job?[3]

The focus of workers, then, should be not upon integration of the concepts and practices of case work and group work, but on the development of each skill to a point where workers can cooperate effectively on the basis of mutual understanding and respect. Thus, in effect, this serves as a challenge especially to group workers, individually and collectively, to master the concepts of generic social work as a foundation for the perfecting of their method in group work. The movement for case work - group work cooperation and study has only recently developed in Boston. In the fall of 1947, under the sponsorship of the Greater Boston Community Council such a committee, composed of group workers and case workers was organized under the leadership of Mr. Saul Bernstein, Professor of Group Work at Boston University School of Social Work. The committee has met monthly and has made a preliminary

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3 Gertrude Wilson, "The Practice of Group Work in Jewish Centers", A Symposium on Group Work - Case Work Cooperation. American Association of Group Workers. New York, N.Y., 1946. pp. 3-4.

survey of the whole realm of case work - group work cooperation. It has studied the experiences in cooperation that have taken place in other cities. It has considered the close integration of case work and group work service by the Red Cross workers in military hospitals in war-time. In a practical way, it has considered very carefully some of the problems of referral from one type agency to the other. It has considered case studies of individuals in the membership of group work agencies whom the group worker wished to refer to a case work agency. In discussing these cases they have become aware of the contribution that each has to offer in helping the individual. Also, many of the limitations of each type of service have been brought to the fore.

In the matter of further practical steps the committee will in the future consider the following questions:

1. Specific referral procedures to be followed by workers in both fields

2. to explore the possibility of providing a camp devoted exclusively to a treatment program for children with behavior and emotional problems

3. to explore the question of setting up inter-agency case work consultation service to help group workers in diagnosing problems and in working out referral

4. to study the function of the "neighborhood" or friendly visitors on the staffs of settlement houses.

The writer, as a member of this committee, was stimulated to make the study that follows.

CHAPTER III

CONCEPTS AND CRITERIA

I. The Concept of Case Work

In its early aspects, case work was concerned with relief giving and care of the sick - or as it was then called - charity. Case work developed to its high level of skill because of its practitioners' determination to meet the seemingly inexhaustible array of individual and social problems posed by modern technological and industrial society.

The motivating force in the case workers' drive to effect social betterment is the concept of love of one's neighbor. In attempting to help individuals with their personal and family problems, the case worker reached out to other fields for bodies of knowledge and skills. As it became more effective in solving human problems on the basis of its individual approach the method was accepted by an increasing number of workers in the field of social welfare. Today the case work method is employed not only in helping in family problems, but in the social service of hospitals, in the case work service of guidance clinics, in public welfare, probation work and other allied fields of social work.

Among the notable statements that serve to describe the aims and the method of the case worker is that of De Schweinitz:

> Case work consists of those processes involved in giving services, financial assistance or personal counsel to individuals by representatives of social agencies, according to policies established and with consideration of individual need.[1]

The objectives then of case work are concerned with effecting the adjustment of the individual to his environment. It seeks to accomplish this by giving service to the individual in the form of personal counselling, financial assistance, health service or changing of his immediate environment. More recently case work has proven its capacity for diagnosing and treating some emotional components in a client's social maladjustment. In case work, the case worker helps the individual by and through the method of interview. This face to face relationship with the client and his problem is the core of case work theory and practice.

II. The Concept of Group Work

Group work, once thought of only in terms of agencies that provided recreational and leisure time activities, has now taken on a more specialized meaning. As a method in the field of social work it has been defined by Newstetter as: "The development and social adjustment of an individual through voluntary group associations, and the use of this association as a means of furthering other socially desirable

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1 Elizabeth Mc Cord De Schweinitz, "Can We Define Social Case Work?" Midmonthly Survey, LXXV (February, 1939), pp. 37-39.

ends."[2] This rather general statement has been made more specific by Miss Grace Coyle, who says that "group work aims at the development of persons through the interplay of personalities in group situations, and at the creation of such group situations as provide for integrated, cooperative group action for common ends."[3] Each definition then includes two aspects of the group work process - the adjustment of the personality to the other members of the group, and the direction of the group toward socially desirable ends. It is with the first aspect that this study deals.

In common usage, the term "group work" is still associated with agencies which are of a recreational or character building type. The most universally recognized are the Y.M.C.A., Y.W.C.A., Boy and Girl Scouts, Y.M.H.A., Y.W.H.A., Boys' Clubs and Settlements. In many of these agencies the emphasis of the program is on athletics and recreation. Group work in its technical sense may occupy a relatively large or small part of their programs depending on the agency's emphasis.

In the study some attempt will be made to differentiate between these two components of the group work process.

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2 W. I. Newstetter, "What Is Social Group Work?", Proceedings National Conference of Social Work, 1935, p. 291.

3 Grace L. Coyle, "Social Group Work," Social Work Year Book, 1937, p. 461.

III. The Group Activities in Group Work Agencies

In these agencies, the program includes mass recreation activities, such as swimming, gymnasium activities, mass social activities such as dances, parties and entertainments. Then there are group activities. Under this heading there are two different kinds of groups.

One kind is the natural or friendship group. The other is the special interest or formed group. Both these types of groups are composed of a comparatively small number of individuals and both are under the supervision of a group leader. The designation given these groups indicates their nature. The natural group is sometimes referred to as a "closed" group because only individuals who are rather intimately acquainted with each other are included. The formed group conversely is referred to as an "open" group because membership is based on an interest in the kind of activity the group is set up for. This type of group may include groups such as discussion groups (special interest), dramatics and art (special talent), scouts (special program). As a recent development groups having a therapeutic objective have been organized in some of these agencies. In such a varying array of groups, large and small, natural and formed, what are the corresponding functions of the group workers? The function of the group worker in conducting activities of mass proportions is obvious - it is to provide socially acceptable and

individually satisfying activities. Within the context of the small groups the role of the group worker is more purposive and more related to the individual needs of the members of the individual's personality.

IV. Similarities and Differences of Case Work and Group Work

In discussing the emphases of case work and group work Miss Gordon Hamilton writes: "These aspects of case and group work process lie close together in their educational and therapeutic aims."[4]

Apart from their common origin and progenitors, case work and group work possess other similar aspects. Both share the objective of seeking the individual's maximum adjustment to society. Both aim at the development of and growth of the individual with respect to solving his problems and his relationships to his fellow-men.

Each method is based on the respect for the dignity of the individual regardless of his needs and status in society. In case work this affirmation is engendered in the principle of confidentiality of records. In group work it is inherent in the voluntary aspect of the individual's participation in group life.

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4 Gordon Hamilton, The Theory and Practice of Social Case Work (New York, N.Y. Columbia University Press, 1940), p. 10.

Workers in both fields understand the interrelatedness of the individual and his environment and try to meet his needs in this perspective. Above all, both fields approach the individual who seeks their service in a non-coercive - non-judgemental attitude. Both fields share the same concern and responsibility for meeting the social, economic and health needs of the communities they serve.

The fundamental differences of these two fields lie in two areas, the method, and the relationship t o the individual. The method of case work is the personal interview. The method of group work is the use of the dynamics of the group situation.

Further difference in relationship between the workers and their clients or constituents issues from the fundamental difference in method. The case worker, because of the face to face relationship with the client, becomes more intimately aware of his needs whether they be overt or verbal. The case worker in a sense becomes responsible and exerts a rather protective influence over him until such time when he may regain his place in society.

The group worker in general while interested in individual needs must keep his focus of attention on the group activities and group goals. The member of a group work agency comes to the agency voluntarily and thereby does not lose status in the community. His membership presupposes a capacity

on his part to share in relationships with others.

V. Criteria for Case Work - Group Work Cooperation

Out of the experiences of case work - group work cooperation has come a body of criteria for a good working relationship between the practioners of both fields. This then may serve as a point of reference in evaluating the relationships and results contained in the cases under study.

Basic to any form of effective relationship between case worker and group worker must be understanding of each other's function. Given this primary prerequisite, the criteria for studying the use of group work service by the case worker will center around the area of each worker's responsibility.

The case worker who is considering the use of group work resources in the treatment of the individual must, in the first place, be familiar with the general area of group work and the types of programs offered by group work agencies. The case worker then must decide what type of group work will be of most value to the client. Next, the case worker must be assured that the client is ready for the group work experiences.

In the matter of relationship with the group work agency, the case worker usually sets the pattern. In referring a client to a group work agency for the purpose of providing recreation or education, a case worker needs only in her contact with the group worker to impart the necessary informa-

tion that will enable the group worker to understand the client quickly and help him become integrated in the group. A second type of relationship may be called for in the referral of individuals whose problems have emotional components. This more personalized referral relationship would necessarily involve a carefully worked out plan by case worker and group worker for treatment. Here the case worker must be responsible for supporting a client in the process of working into the group work program. The case worker is responsible too for making periodic contacts with the group worker to determine the client's progress or to discuss new developments. In a third type of relationship a case worker may establish with a group worker may be described as cooperative. This kind of relationship, rarely found, would involve close working together in every aspect of the treatment process. Usually it would involve separate records by both workers and frequent joint conferences.

From the point of view of mechanics, the case worker should in making a referral, regardless of type, send the group worker written information regarding the client which should include identifying data, a summary of case worker's contacts with the client, a statement of what the worker expects from the group work agency, and a statement outlining the relationship of the case worker to the client during the period of contact with the group work agency.

The responsibilities of the group worker in such a

referral relationship are obvious. In addition to discharging the regular duties attached to leading the group, they would involve making suggestions regarding the type of group the individual may find helpful. It would devolve upon the group worker to give special attention to the individual referral and report to the case worker any unexpected development. The group worker would be responsible for making a summary of the client's group work experience periodically.

The concepts and criteria considered above will serve as a background for the material to be discussed in the subsequent chapters.

CHAPTER IV.

DESCRIPTION AND CLASSIFICATION OF DATA

I. The Individuals Studied

In all, twenty cases involving twenty-one individuals were studied. These cases were drawn from the files of four typical agencies from the fields of family, medical and psychiatric social work. In seventeen cases involving eighteen individuals the case worker made a referral to a group work agency for a particular purpose. In three cases, the case worker consulted with the group worker relative to treatment plans for the client. In six of the cases group work was brought in as a preventive agent. In eleven cases the individual was provided group work experience to help overcome his problem. Three other individuals had a previous group work contact which the case worker attempted to renew.

Of the twenty-one persons, twenty were children whose ages ranged between seven and sixteen years. One case only dealt with an adult, an aged woman. Of the twenty children, fourteen were boys and six were girls.

II. Problems of Individuals

Group work was employed to assist in correcting problems of varying types and degrees of seriousness. These were in the areas of home environment, medical, emotional and behavior disorders, and old age. In all the cases the focus

TABLE I.

AGE RANGE OF THE TWENTY CHILDREN STUDIED

Years	No. of Children
7 - 7.9	1
8 - 8.9	3
9 - 9.9	4
10 - 10.9	4
11 - 11.9	1
12 - 12.9	3
13 - 13.9	2
14 - 14.9	0
15 - 15.9	2
Total	20

TABLE II.

TYPES AND FREQUENCY OF PROBLEMS OF INDIVIDUALS IN THE STUDY

Problems	No. of Individuals
1. Disturbed Home Environment	3
2. Medical	
Cerebral palsy	1
Osteomyelitis	2
Epilepsy	2
Heart Disease	2
3. Behavior & Emotional Disorder	
School failure	4
Aggressiveness	4
Withdrawal	2
4. Social	
Old Age	1
Total	21

of the case worker was in treating the principle need of the client. Group work was used as a supplementary resource to case work, medical and psychiatric treatment.

In the problems of home environment, the disturbances were caused in two cases by neurotic, overprotecting mothers. In another, the home condition was complicated by the mother's cohabitation with a man not her husband. Some of the symptoms of emotional and behavior disturbances were destructiveness, immaturity, temper tantrums, hyperactivity, and disobedience in the home.

III. Pre-Referral Interpretation

A. With Parents and Clients

In sixteen cases out of twenty the case worker devoted part of one or more interviews with the parents and clients to discussing the value of a group work contact. The focus of the problems of interpretation centered generally on the mother of the client. In many cases the case worker had to work intensively with an overprotective mother to allow the child the opportunity for group work experience. In other cases the main efforts of the case worker were directed toward helping the mother with ways of persuading the child to attend a group work agency. This tended to be the pattern of interpretation in the situation where the client suffered an emotional disturbance which resulted in withdrawal. In the majority of cases, both mother and client were receptive to

the idea and in these cases the case worker concerned herself mainly with describing the particular group work agency she considered appropriate. Specifically, some items included in these interviews dealt with the program of the agency, the working out of financial arrangements for client and the directing of client toward a particular person in the group work agency.

B. To Group Work Agency

The study revealed that in ten out of seventeen cases where referrals were made to a group work agency there was pre-referral contact with the group worker by the case worker. The purpose of these contacts was to ascertain the type of program and to determine whether the group worker could give the client the necessary attention. In eight instances, the case worker made this contact by telephone. In one case the contact was made by letter and in another the case worker visited the agency. In two cases one telephone call served to secure the necessary information and to make the referral.

IV. Methods of Referral

In seventeen of the twenty cases, the referral of a client was made by a case worker to a group work agency. In each situation the referral constituted a new contact for the client. In three cases the case worker followed up the client's existing relationship with the group work agencies in order to

secure diagnostic material and to help the client make better use of his group work affiliation. Generally, the case worker made the referral by telephone. Nine of the referrals were made through this medium. In six cases, a letter served as the referral agent. On two occasions the case worker visited the group work agency and in a conference with the group worker arranged the referral.

V. Relationships in Treatment

Treatment relationships are the crux of case work - group work cooperation. The nature of the working relationship between the two workers may determine the outcome of the client's group experience. Contacts between case work agency and group work agency that terminate with referral of the client cannot be described as cooperation. Follow-up of the referral by the case worker then is all important.

In thirteen of the seventeen referral cases there was follow-up activity by the case worker. In general the average (median) duration of the client's group experience was approximately fifteen (15.0) months. The average number of contacts by the case worker after referral was two.

It is significant to note in this regard that while eight of the original referrals were arranged by telephone, only in four instances did the case worker use this method exclusively to follow-up on the client. In every other case the case worker visited the group work agency at least once to

confer with the worker interested in the client. The visitation of the group work agency by the case worker occurred usually when the client was not in attendance. In seven of the cases, follow-up on each case was effected by periodic telephone calls and conferences. In two rare instances, the group worker attended joint conferences called by the case worker which were attended by psychiatrist, psychologist and the two workers.

In only four cases was there no follow-up by the case worker, one of these being a recent referral.

VI. Duration of Client's Group Work Experience

In all the cases the referral to the group work agency was made after 1940. The earliest being dated August 1940 and the latest, October 1948.

TABLE III.

DURATION OF CLIENT'S GROUP WORK EXPERIENCE
FROM DATE OF REFERRAL TO JANUARY 1948*

Months	No. of Cases
Under 6 months	3
6 to 11.9	2
12 to 17.9	5
18 to 23.9	2
24 to 29.9	3
Over 30	2
Total	17

*The average median length of contact is 15 months.

VII. Group Work Agencies Used by Case Worker

The predominant type of group work agency found in these cases was the settlement house. Seven of the referrals were made to such agencies. Perhaps this was due to their proximity to the residence of the client. The types of activities in which the client participated are noted below.

TABLE IV.

TYPES OF ACTIVITIES IN SETTLEMENT PROGRAM ENGAGED IN BY CASE WORK CLIENT

Activities	No. of Clients
Girl Scouts	2
Cub Scouts	1
Old Age Program	1
Swimming & Hiking	1
Hiking & Gym	1
Dancing	1
Total	7

Two referrals were made to Y.M.C.A. and in these cases the principle activities of the clients were swimming, gym, crafts and woodwork.

In five cases the case worker called upon an agency that provides protected group experience for children who otherwise would not adjust to group life. Under this service a group was organized for the client in his own home. This group was developed as a "club" with weekly meetings. The programs consisted of activities such as handcrafts, drawing, reading, games and trips.

One referral was made to a Boys' Club to provide a boy with opportunities to learn to draw. Another referral was made to a Y.M.H.A. for gymnasium activities. A girl of fifteen was referred to the Y.W.C.A. for lessons in dancing.

In those cases where the case worker used the existing group work contact of her client for observation and diagnosis the group work agencies involved were a settlement, a Boys' Club and a Y.M.C.A .

The group work agencies provided further resources to the case worker in their camp programs. In ten cases the camps sponsored by the group agencies furnished additional group experience to the boys and girls who were referred. In three cases, the group work agencies assumed full responsibility for planning and providing camp experience.

VIII. Classification of Data

The material has been classified as follows by the writer. The basis of the classification rests on the particular role that group work played in each case. First will be discussed those cases in which group work was used as a preventive factor. Next, are those cases in which the case worker used group work as a resource in treating where breakdown of one kind or another had already occurred. As a subgroup of this category the writer has distinguished those cases in which the case worker referred a client to a group work agency for a special interest or skill. In the third major category are contained those cases in which the case

worker used an existing group work contact of the client as a consultive resource for observation and diagnosis. Since most of the cases studied fall into the second category it has been necessary to include several sub-groupings under that classification. The following is a topical outline of the classification groups, in the order in which they will be treated:

I. Group Work in Preventive Treatment

II. Group Work in the Treatment Process

A. As therapy
   1. In medical problems
   2. In social problems
   3. In emotional and behavior problems

B. As an outlet for individual's special interest.

C. As a consultive resource

CHAPTER V.

GROUP WORK IN PREVENTIVE TREATMENT

In a general sense, group work's meeting of the normal individual's social needs may be regarded as a preventive function, in that it helps insure a healthy community. There were six cases in which group work was used as a preventive agent. Here the case worker used group work in a specific situation to help an individual maintain his ability to function as a member of society. Four of these cases will be discussed in this chapter. In all these cases there was no overt breakdown in the individual's total ability to function as a social being. There were rather, significant "danger signals" either resident in the individual's home environment or in personality traits stemming from unmet emotional needs which alerted the case worker into some action on behalf of the client.

Home Environment Factors

In three cases studied the clients presented problems of home conditions which the case worker tried to overcome by referral of the client to a group work agency. Discussion of two of these cases follow.

The story of Catherine T. illustrates how the case worker used group work resources in helping the client free

herself from the restrictive effects of a home condition marked by neuroses in the mother and the ineffectiveness of the father.

A. Catherine T.

Catherine's family was described to the case worker as one of the most neurotic in the district. The T. family was of Syrian background. Mr. T. was a native of Syria and Mrs. T. was American born but had been reared in strict old world custom. Mrs. T. was twenty-one years younger than Mr. T. The marriage had been an arranged affair which involved no deep emotional bonds between husband and wife. At the point of contact with the agency, Mrs. T. was a thin, nervous, excitable person who was easily disturbed. At times she exhibited hysterical behavior. Mr. T. was a slight, frail man in poor health and with a record of infrequent work as a barber. Mrs. T. applied for financial assistance at the agency at a time when Mr. T. required hospitalization. At the time of contact, Catherine was six and Esther was twelve. Mrs. T. displayed a restrictive, over-protective attitude toward the children. She had fears about letting them out of the home for any reason. Playing with other children was out of the question.

During a contact of several years, the case worker became aware that Esther and Catherine were in danger of acquiring some of the neurotic characteristics of Mrs. T. Both youngsters were dominated by their mother. They were required to return home immediately after school. They were not allowed to have friends because Mr. T. feared that other children weren't good enough.

When Catherine was eleven years of age and Esther seventeen, the case worker suggested to Mrs. T. that the children might benefit from group work activities. Mrs. T. objected to this because she could not bear to have them away from her for fear that harm might come to them. For several months the case worker spent much time in her interviews trying to bring Mrs. T. to a point where she could free the children for play activities. When Mrs. T. consented and the case worker approached the girls, Esther rejected the idea completely but Catherine expressed a desire to join some activities.

The case worker spoke with a group worker in a nearby settlement regarding possible activities

for Catherine. Following a conversation with Catherine, the case worker arranged to take out a membership. The two activities that Catherine elected to join were Girl Scouts and a cooking class. In her weekly interviews with the case worker, Catherine expressed satisfaction with her group work experience. Catherine was an attractive, normal girl and consequently she made friends easily. She admired her club leader almost to the point of idealization. While Catherine was active in these two groups the case worker had to give her financial help. She purchased Catherine's Girl Scout uniform. In the summer she arranged with the settlement for Catherine's vacation at camp.

In the fall Catherine again enrolled at the settlement house. This time she added other kinds of activities to her program. She joined a basketball group and began to attend the weekly dances. Catherine was emerging as a leader among the young people. She was quick, intelligent and enthusiastic. Her leader described her as one of the most winning personalities in the agency. In that year, during the Community Fund Campaign, Catherine was instrumental in organizing the Red Feather Youth Brigade in her agency. This group of young people planned and undertook a program of speaking and demonstration of the contributions of the Fund to youth activities. Catherine is still a member of that settlement's program.

In Catherine's case, the case worker made the referral to the group work agency to free her from her mother's neurotic influence so that she could develop as a normal positive personality. Because Catherine's personality was undamaged, the mere providing of the group work experience was sufficient for her to develop her interests. The amount of cooperation between case worker and group worker was not extensive. The case worker effected the referral by means of telephone conversations. The case worker was supportive in the matter of supplying occasional stipends to help Catherine in the

group work program. A contribution of the group work agency to Catherine's development, apart from the obvious one of providing the activities, was in the opportunity it afforded Catherine to identify herself with an active, integrated woman-figure. This was the person whom Catherine idealized and in practice was attempting to emulate.

The referral of Catherine was primarily a referral for recreation. The client had no personal problem. She was ready for the group experience. She needed only the opportunity and environment in which she might develop and grow as a person.

The working relationship between the two workers discloses a familiarity on the part of the case worker with the group work resources in the neighborhood. The case worker's contact with the group worker, though not intensive nor frequent, was enough to enable the group worker to understand Catherine's situation and help her.

The case of Agnes B. reveals the process of co-operation between case worker and group worker in behalf of a girl whose home environment was marked by a disturbed marital relationship.

B. Agnes B.

Agnes at the age of nine was a hyperactive, nervous youngster in poor physical condition. Although she had an I.Q. of 124 she was failing in school. Her mother, Mrs. J., had come to the

family agency two years before for financial aid. At this time Mrs. J. was pregnant and had just been deserted by her husband. The family situation was further complicated by the fact that Mrs. J. was living with another man, a Mr. B. whose name Agnes bore. Mrs. J. professed a real love for Mr. B. who was married but separated from his wife. Mrs. J. refused to end her relationship with Mr. B. The case worker soon understood that this family situation was the cause of Agnes' difficulties in school. Her school life was tempestuous and full of conflict. The children taunted her because of her mother's relationship with Mr. B. They scornfully pointed out the difference between her name and that of her brothers. Agnes tried to retaliate against these jibes by fighting and swearing at her tormenters.

Soon Mrs. J. took her family to live with relatives in Canada. After an absence of four years she returned to Boston and immediately renewed her contact with the agency. Again Mr. B came to live with the family, which at this time made its residence in a lodging house of questionable reputation. Mrs. J. worked evenings as a waitress.

Agnes at thirteen was a large, awkward girl. Her stay in the country had corrected her difficulties of the previous years. She was, however, even more sensitive to the unhealthy conditions of her home. She was ashamed of her mother and she feared Mr. B. At school she rejoined her former schoolmates and their pattern of abuse began anew - this time on a less dramatic and violent level. Agnes was ostracised.

The case worker soon turned all her attention to helping Agnes overcome her difficulties about her home conditions. In her talks with Agnes, the case worker suggested that she join a local neighborhood house where she could meet other young people her age. Agnes declined to do this because she feared a repetition of her school experience.

Agnes was introduced to the environment of this settlement a year later. At this time she was leading a happier existence because all her former schoolmates had departed to various high schools in the city. The motivating force which led Agnes to the settlement was a desire

on her part to have a place to go where she could play the piano. The case worker called the settlement to see whether such a facility was available for Agnes. She arranged to have Agnes visit the settlement one afternoon a week to use the piano.

In her call to the group worker the case worker explained Agnes' problem and informed the group worker of her desire to see Agnes brought into the social and recreational program of the agency. Miss B., the group worker, was confident that Agnes could be introduced to some of the activities. Agnes was introduced to Miss B. by the case worker. In the course of her weekly visits to the settlement Agnes had the opportunity to get better acquainted with Miss B. During this period Miss B. reported to the case worker that Agnes was becoming a casual participant in the activities at the settlement. In the following months Miss B. persuaded Agnes to join a group of girls her age who had organized a social club. This club appealed to Agnes because of its emphasis on swimming and hiking activities. Agnes refused to attend the weekly dances because of her size and awkardness. Miss B. told the case worker that the girl was doing well in her group and that she was liked by the other members.

In interviews Agnes seemed happier and more confident of herself. She told the case worker that she would like to go to college and wondered whether she could get after school work to help finance it. The case worker encouraged her in these plans and thought that there might be something for her to do at the settlement. The case worker contacted Miss B. regarding this matter. Shortly afterward Agnes was engaged by the settlement to supervise a children's group in an arts and clay modelling group. She accepted this responsibility with enthusiasm. This work brought her into the settlement every afternoon. During the Christmas holidays, Agnes worked full time at the agency. Her experience in teaching painting and drawing to younger children made her feel that she wanted a career in art. Miss B. and her other friends on the staff encouraged her to work toward this end. With her case worker Agnes began to consider specific plans for college.

When summer came the case worker arranged

for Agnes to work at the settlement's camp as a junior counsellor. In the fall Miss B. reported that Agnes' work at camp had been highly satisfactory and that she hoped Agnes would continue her work with the children's group.

Agnes began to complain of fatigue to Miss B. She was advised to consult with the physicians at the Boston Dispensary. Tests taken there proved that she had a tuberculosis infection in her lungs. She was advised to give up her school and settlement activities and go to a sanitarium. The onset of this illness dispelled all hope of realizing her dreams of a career in art. Her letters to her case worker from the sanitarium however brimmed with gratitude for the happy and satisfying friendships she had made at the settlement house.

In evaluating the contribution of Agnes' group work experience it must be noted that Agnes was developing neurotic tendencies as a result of her unhappy home situation. Her group work experience helped prevent the breakdown of her personality.

Agnes' interest in having quiet surroundings in which to practice the piano was the motivating force which helped her accept the environment of the settlement. Once she became acclimated to the atmosphere of acceptance she was able to move into the area of participation in social activities. With the further acceptance shown her by engaging her to lead the children's group, Agnes found in the settlement a "second home". Surely, the environment of the settlement was in sharp contrast to her home conditions. The settlement experience provided Agnes with a number of factors which the individual needs in order to grow. The activities, swimming and hiking,

gave her an opportunity to express her interests and abilities. The leading of the group enabled her to discover her talent and gave her the feeling of independence. Her relationship to the staff and to Miss B. gave her acceptance and recognition by adults.

In many ways the relationship between the case worker and group worker in this case amounted to cooperation. The record of the case worker indicates several different kinds of contacts between both workers. The case worker made several telephone calls to the group work agency before referral was made. In the course of treatment the case worker visited the group work agency. The record also includes two joint conferences held by case worker and group worker to discuss Agnes and her problems. There was no record of written summaries being sent by case worker to group worker. The case worker who worked with Agnes expressed complete satisfaction at the understanding shown and the assistance given by the group work agency.

Emotional Problems

The two cases to be discussed in this sub-group represent the application of group work processes and situations in the treatment of children with emotional disturbances that result in behavior patterns of withdrawal or aggression.

The case worker's use of group work as preventive treatment in cases where the client presented personality

traits which were indicative of underlying emotional needs is illustrated by the case of Helen Z.

C. Helen Z.

Helen's parents were separated. The father was an alcoholic. The mother had been aided financially by a family service agency since her difficulties with her husband began. When Helen was thirteen years old her mother was working as a car cleaner in the railroad yards. Helen and George were the only children. George was a healthy, normal boy.

Helen worried her mother because of her self-imposed seclusion from girls her own age and her over-preoccupation with religion. She spent all her free time in her room, which she had arranged as a place of worship. She begged her mother to allow her to enter a convent. With the onset of menstruation Helen expressed fears of bleeding to death. Her mother's alarm increased when Helen began to fast. This affected her physical condition. She was a shy studious girl who spent all her time at home studying and arranging her altar.

Since the mother was out of the home all day she could not give Helen the attention she needed. She asked her case worker to see what could be done about her daughter. She appreciated her daughter's interest in religion but shared the case worker's belief that it was rather unnatural for a girl of that age. When the case worker made her calls at the home she had never been able to reach Helen. The case worker then invited Helen to come to talk with her at the office. In these interviews the case worker suggested that she might enjoy being in a club with other children.

Later the case worker called the girls' worker of a settlement in Helen's neighborhood to inquire as to what groups there were for a Girl of her age. She was told that a Girl Scout troop was being organized and that Helen would be welcomed. In their next interview the case worker told Helen about the Girl Scout troop and urged her to attend the first meeting. Helen enrolled as a member of this group. (At this time Helen was in her second year at high school and was getting high grades.)

Helen attended Scout meetings regularly

> and in a short time became interested in the activities. In one of the early organizational meetings she was elected a group leader. She was very well liked by the other girls because she was earnest and capable. She participated in all the activities of the troop and took a special interest in a puppet making project. She became very proud of her achievements in scouting. In her weekly interviews with her case worker she spontaneously told about all her activities in the group. She said that she had made several friends. She began inviting these friends to her house after school.
>
> Helen continued in the group for over a year. At the end of it the case worker helped her attend the Girl Scout camp. This experience she enjoyed even more than the troop. The following year the troop was not continued at the settlement house. Helen was thoroughly disappointed. She had found this group experience so satisfying that she invited a number of her friends to form a club. It met weekly in her home. Some of the girls in this club were those she had met in the scout troop. Helen still attended mass every morning and she still retained an interest in entering a convent.

In Helen's case the problem posed was one of flight from a drab reality. The child's fantasy life seemed to be the only satisfying experience outside of school. Helen's mother was prevented by her breadwinner role from giving Helen the emotional affection she needed. The purpose of the referral was to provide Helen with the opportunity to have pleasant normal contacts with other children, to help her find friends, and to give her the interest and affection of an adult woman. The referral was effected by a letter which stated Helen's problem. On several occasions the case worker contacted the group worker by telephone. The case worker in summarizing

Helen's group work experience felt that it was a major factor in checking Helen's introvert tendencies - that Helen would have been emotionally and socially retarded without such an experience. Helen's mother, in discussing her daughter with the case worker, declared that Helen was a "completely different" person.

D. Willard H.

Willard, age nine, was a problem in the home. His mother complained that he did not obey her, that he was stubborn and did as he wished. His school report however indicated that Willard was of normal intelligence and was not a problem. The case work agency had known the family for eight years. The father was out of the home. He was an alcoholic whose abuse of his wife had led to separation. The father however made persistent attempts now by assurances and now by threats of violence to rejoin his family. The mother, thoroughly fearful of the father, insisted on divorce. She was constantly apprehensive that Willard would grow up to be like his father. Willard, himself, disliked and feared his father.

The case worker suggested referring Willard to a group work agency in order to provide him with the opportunity for developing his creative interests and to give him the opportunity to make friends. The case worker consulted the child guidance clinic which was interested in the boy and learned that the psychiatrist regarded him as a normal boy who was reacting to his unstable home condition. The psychiatrist approved the plan to introduce Willard to organized group experiences. The mother sanctioned these plans. Next the case worker contacted the school and learned from the teacher that Willard had expressed interest in marionettes. The case worker reached the boys' worker at the nearby settlement, outlined Willard's home conditions and his reactions to them and asked about groups that he might join. The group worker suggested that Willard might enjoy being in a Cub Scout group. An appointment was made for the mother to bring him in to enroll. The Cub Scout group was under the leadership of a Mr. W., a volunteer. Willard

threw himself wholeheartedly into the program. He worked diligently to pass the various tests and as a result won many insignias. These he proudly exhibited when the case worker came on visits. When a Boy Scout banquet was held at an intown hotel, Willard was invited to attend with a sponsor. That summer he was able to go to camp due to the club leader's efforts in raising funds. His behavior in the home during this period changed immeasurably. His mother glowed with the affection which her son showed her. The scout program was not continued in the fall. The case worker and group worker attempted to introduce him to a general playroom activity, but Willard didn't respond and slowly he dissolved his ties with the settlement.

In the two cases cited above the children were bright and sensitive individuals. Willard tried to ward off his fears about his father by aggressive and hostile behavior against his mother. Helen, on the other hand, attempted to escape from her home situation by withdrawal to another world. What function did the group work experience perform in the working out of the problem? It is interesting that similar types of group work programs were used in both cases - re: Girl Scouts and Cub Scouts. This type of group work is characterized by emphasis on the content of the program. The program consists of a planned and graded course of achievement in scouting. Another feature of this type of group work is that membership is limited and leadership is constant. The program allows for rapid development on the part of brighter children and slower on the part of the average child. Recreation is an integral part, but not the main emphasis of such a program. Clearly it is not difficult to see why these children adjusted

so well to these programs.

For Willard, the group provided a father substitute and gave him the opportunity to make an identification with his leader. To Helen the need for an adequate normal mother figure was met by the adult scout leader.

CHAPTER VI.

THE USE OF GROUP WORK IN THE TREATMENT PROCESS

As contrasted to the cases described in the preceding chapter, the fourteen cases in the following group were marked by some overt inability of the patient or client to function properly as a member of society. Maladjustment was displayed in the areas of home, school and social life. The degree of maladjustment had usually advanced to the point of physical restriction or social and emotional retardation. In these cases the chief focus of attention was on the client's primary problem and group work was tried as a method of treatment. As the results show, group work in some cases made notable contributions to the client's eventual recovery.

I. Medical Problems

In six of the cases the individual's problem was caused by physical disability. The following case represents a situation in which a child with a serious physical difficulty was helped integrate himself in normal activities.

A. Thomas Y.

Mrs. Y. brought Thomas, age ten, to the hospital because he presented behavior and personality problems at home and in school. Thomas was unable to write legibly. He had crying spells and uncontrollable fits of laughter. He feared darkness and would occasionally cry out in his sleep. In school he indulged in compulsive behavior such as getting up from his seat and walking around

the room. He was not allowed to walk in line with the other children because he was continually falling. Because of his behavior and his personal unattractiveness he was tormented by other children. Upon examination by physicians Thomas was found to be suffering from cerebral palsy.

Thomas had a brother Ernest, aged nine, who was being treated at the same hospital for osteomyelitis and a congenital heart condition. The two brothers were devoted to each other, but had no friends in the community.

With the doctor's approval the case worker suggested that the boys be introduced to the program of the local Y.M.C.A. Mrs. Y. said that the boys had always wanted to go there. They were jubilant when they were asked about joining the "Y". The case worker called at the Y.MC.A. and spoke with Mr. P., the director. She explained the boys' condition and their need for supervised recreation. Mr. P. was sympathetic and assured the case worker that he would do all in his power to help the boys fit into the program. Short term memberships were arranged for both boys on a trial basis. Mr. P. suggested that they be urged to join classes in woodcarving, leathercraft, gym and swimming.

Thomas and Ernest were given their membership cards and they began to attend the "Y" immediately. The first few days were difficult for them. Mr. P. soon learned that some of the members were ridiculing the boys. When such occurances took place Mr. P. made it a point to speak to the boys who were picking on Thomas and Ernest. This was enough to put an end to the practice and it paved the way for the boys' acceptance of the two brothers. Thomas turned his interest entirely to gym and swimming because these activities gave him freedom of movement. Ernest, because of his attachment to Thomas, was allowed to take part in swimming.

During this period, the case worker made three visits to the agency. With Mr. P. she discussed the boys' progress and difficulties in adjusting to the group program. Mr. P. related how, except for Thomas' occasional falling down in the shower room, the boys' efforts at doing the things that other boys did were successful. Mr. P. said that the boys required a good deal of supervision on his part. He admired their spirit and determination to be "regular boys."

During one of these interviews the case worker informed Mr. P. that the doctor had advised the curtailing of Ernest's swimming. Mr. P. observed that such a restriction would hurt Ernest because he had developed such an interest and skill in that activity. Ernest's condition however was declining and in a short time he had to withdraw from the "Y" program. Thomas however continued his relationship with the agency in spite of his brother's withdrawal. In time he became a regular member of the "Y". Mr. P. introduced him to the monthly supper meetings and helped him join the day camp program the following summer.

In this situation, Thomas was arcusing the hostility of his environment because of his behavior, the cause of which was misinterpreted by the people with whom he came in contact. The boy wanted to be a part of the social life about him but he was rejected. The case worker's role in helping Thomas was in providing a controlled environment in which the boy's deformities would be understood. The process of adjustment took place in the boy himself. He was given the opportunity to find a place for himself in the program of the "Y". He made this adjustment with the aid of the case worker and the Y.M.C.A. director. Again, this illustrates the second level of referral relationship - the personalized approach in helping a client adjust to a group work program.

In the next case, a child confined to his home because of osteomyelitis is provided with group experience to maintain his morale and interest in normal activities.

B. Anthony F.

Anthony was an attractive nine year old boy who was afflicted with chronic osteomyelitis.

After his operation his doctors anticipated a long period of bed rest. In all other respects Anthony was an active, healthy boy. Throughout his illness he had been a "good sport" about being restricted. His case worker was aware that Anthony's good spirits had to be maintained. The case worker in searching for possible recreational resources learned about a children's agency that sponsored a program devoted to protected groups. Her suggestion that such a group be formed for Anthony was welcomed by both the boy and his mother. The case worker felt that this program would adequately supplement the service of a Visiting Teacher. A request to the children's agency was made by the case worker.

With the help of Mrs. F. the group worker from the children's agency brought together a small group of boys and girls to meet with Anthony every week. The group organized itself as a "club." A set of children's books was brought out by the group worker. Games were also supplied by the agency. During the first year, the program of the club consisted of reading and playing games. During this period, Anthony admitted that his club experience had taught him how to enjoy a book.

The case worker asked that the club be continued through the next year, when Anthony was able to be up and around with the aid of braces. The aim of the group worker now was to provide activities that would be interesting yet would not overtax Anthony physically. The difficulty with Anthony was that he indulged in activities so strenuous as to cause a recurrence of his infection. The case worker felt that the group had been a very constructive factor in Anthony's life and that it was likely that he would need closely supervised activity for some time.

During this second year, the case worker and group worker decided that the club might be more satisfying if it were composed entirely of boys. The group worker contacted Anthony's school and discussed the situation with his teacher. At the meeting twenty-four boys appeared. Out of this group about eleven continued in the club. The program included active games, painting, crafts and a number of trips (by car) to points of interest in Boston.

Because the club had been organized for him, Anthony tended to dominate the other boys. Both workers were aware of this problem. At one

> meeting of the club the group worker suggested that since clubs usually had officers, "it might be nice for this club to have a president." An election was held in which another boy was chosen as president. Anthony's dismay was partly assuaged by the fact that he was elected treasurer. With more interpretation by the group worker regarding the democratic nature of the club, Anthony became more cooperative. The club continued for a period of two years. By that time Anthony's leg had improved enough to enable him to participate in the normal activities of the neighborhood.

The part that this group work experience played in Anthony's life cannot be accurately measured. During the two years of confinement and periodic visits to the hospital the group was the only bright spot in Anthony's life. It gave him the company of other children and some of the satisfaction of doing things together with them. It helped keep up his morale and his generally healthy outlook on life. The program was geared to his needs and was developed at a pace in conformity to his handicaps. It helped meet his problem of relationship with other boys in that it put him on an equal status with other boys. In the area of worker's relationships, this case approximates to the greatest degree the level which Miss Wilson refers to as cooperative work. On this case both workers kept in close contact with each other. The group work agency was rather unique in that it kept a record not only of the club meetings, but of the group worker's discussions with Anthony and his mother. In this case, the case worker and group worker fulfil in entirety all the prerequisites for good cooperative

treatment. The case worker requesting the club sent the group worker a written summary of the case. In treatment there were frequent contacts sometimes at the initiative of one or the other worker regarding problems of Anthony's needs and physical condition. Several joint conferences were held to study and evaluate the development of the case. Cooperation even extended to the point of joint financing of camp plans for Anthony.

This case, in the opinion of the writer, may well serve as a model of case work and group work cooperation on its highest level.

II. In the Treatment Process in Social Problems

The case involving social breakdown depicts a sensitive and skillful case worker's handling of the problem of an aged client whose capacity to be self-supporting was curtailed.

C. Miss N.

Miss N. was a former domestic who resided in a small neat one room apartment in the basement of a lodging house. A falling accident had left her a partial cripple and made it totally impossible for her to perform the simplest of domestic duties. She was referred to a family agency by her landlady. From the outset of her contact with Miss N. the case worker noted the loneliness and emptyness of Miss N.'s life. In formulating treatment plans, the case worker placed her emphasis on attempting to provide social satisfactions as well as financial security.

The case worker consulted the staff of a neighboring settlement and learned about a recreational program for older people. Arrangements were made for Miss N. to attend that program. Several days later, the group worker in charge of the program called the case worker to say that Miss N. had enrolled in her group and that she was attending every afternoon. Miss N. was enjoying herself

immensely at whist and bandage making. Later Miss N. told her case worker that the group experience meant "everything" to her. She was occupying herself constructively and she was having fun and relaxation. Also Miss N. after many years of residence in the community was beginning to make friends. This was the most valuable aspect of the program to her. She told her worker of the thrilling experience of meeting these friends on the street and being greeted by them. Miss N.'s participation in the group program was confined principally to playing whist. She confessed that she spent all her time playing whist with the "boys". She took no part in creative original activities. The group worker however emphasized that Miss N. was a positive influence on the group because of her pleasing personality and her cooperativeness. To supplement this group experience the case worker mentioned the possibility of Miss N.'s spending two weeks at a camp farm for the summer. Miss N. declined on the basis of her difficulty in getting around and on her complete satisfaction with her social life. Miss N. was a regular participant in this program for over a year before illness terminated her experience.

While this case is a rather unusual one, it illustrates the case worker's concern for meeting the needs of the total personality. The degree of cooperation while not intensive was enough to bring Miss N. among like minded congenial friends. In making this referral, the case worker was using a community resource. The group work program was designed especially for older people and because of this there was no problem in adjusting Miss N. to it. The referral relationship between the workers was more than a casual one. There were frequent telephone conversations between them. On two occasions the case worker visited the group work agency to observe the client in activities.

III. In the Treatment Process in Emotional & Behavior Problems

D. James F.

James' mother sought help at the guidance clinic because at the age of ten he had not progressed beyond the second grade. James' teacher described him as a quiet, sullen and uncooperative child. In the classroom he sat at his desk and seemed to be oblivious to all that was going on around him. His school behavior was further complicated by the fact that James had been involved in a stealing episode. In his relationships with other children, James was an outcast. He was immature and quarrelsome as well as destructive.

At home James was the third among four siblings. Both parents were out of the home. An aunt, said to be recovering from a nervous breakdown, lived with the F. family. Mrs. F acknowledged that James was an odd child and that he differed from the other children in the family. She confessed that she and Mr. F. quarrelled occasionally over James. The boy, himself, felt that he was unwanted and unloved. He expressed these feelings to the psychiatrist.

Mrs. F. requested that some group work contact be found to give James supervised play opportunities. The nearest group work facility however was the Y.M.C.A. which James could not join because of his age. Because of the seriousness of his emotional disturbance a protected group experience seemed more appropriate for fulfilling his needs.

A club group was organized for James which met weekly in his home. James, in selecting members for his club, brought in a number of boys much older than himself. These soon took over the leadership of the group, leaving James in the background. After the first year of its existence, both case worker and group worker agreed that the group work experience had not helped James very much. Both workers cooperated in making a successful camp placement for James during the summer.

James' group was continued under new adult guidance the next fall. The membership of the group was sufficiently changed so that the group leader had the opportunity to give James more attention in the meetings. The group

> was moved from James' home to a school gymnasium to provide opportunity for a wider range of activities .
>
> In conferences with the case worker, the group worker described the difficulty of inducing James to participate in organized games. James' idea of group activity seemed to consist of rough and tumble wrestling with the other boys. Gradually he has been stimulated to develop an appreciation for organized, supervised activities. James is making an effort to improve his status with his fellow members. The group, which is still active, gave recognition to this fact recently by appointing James president of the club.

The aim of the group work experience was to provide James with the opportunity for pleasurable play experiences to offset the overlooked aspects of his life. There is no doubt that all factors in the home environment indicated rejection of James. His intelligence was normal (I.Q. 100) but he could not keep up with his school work. James was unable to participate in school activities because of anxieties about himself. His behavior in the group also emphasized anxiety and insecurity. In the first year of the group James' participation was relatively little. With increased attention and support by the leader it may be possible to build up in James enough self-confidence and security to enable him to meet his responsibilities in the school and in the community.

In helping James, several forms of treatment were required. First and foremost, of course, was the psychiatric therapy. Secondly there were the efforts of the case worker in interpretation with the mother, (which were unsuccessful)

and thirdly, the services brought in to improve James' condition. These were classes in remedial reading and the group work experience. Even in the face of the extensive cooperative effort the improvement in James has been slight, though perceptable.

IV. Referrals as an Outlet for Special Interests

The referrals to special interest groups is described by Gertrude Wilson as a "referral for recreation - education." Three of the cases studied may be so classified. In each, the purpose of the case worker was to satisfy the wish of the client for participation in a particular activity.

E. Edwin H.

Edwin, seven years of age, was referred to the Child Guidance Clinic by his mother because of temper tantrums at home and his attention demanding behavior in school. The parents were legally separated. The mother supported Edwin and a five year old sister. The father worked as a carpenter. The psychiatrist recommended that Edwin be sent to a reading clinic and that some provision be made for more adequate after school supervision for him. The case worker discovered that the boy was interested in woodwork. She referred him to the "Y" where he enrolled in crafts. Edwin attended these classes faithfully. After several months of regular attendance at the "Y", he suddenly stopped going. When questioned Edwin said that he no longer attended the "Y" because his crafts teacher had left. Edwin said that he liked his teacher because he took an interest in him. The case worker and Edwin's mother helped re-establish him in the "Y" program by enrolling him in two classes, woodworking and clay-modelling. Edwin continued to attend the "Y", but less frequently than before.

F. Albert M.

Albert, nine, was referred to the Child Guidance Clinic because of backwardness in school. He was an emotionally disturbed youngster, sensi-

tive, immature and apprehensive. At the time of referral, Albert's father was in prison. His mother was an inadequate depressed individual. Two other siblings were John, thirteen and Ellen, three. Because of his low I.Q., the aim of referral to a group work agency was to provide Albert with activities which involved manual efforts. He was referred to the art class of a Boys' Club. This was some distance from his home, but Albert undertook the trips cheerfully. The case worker provided him with his fare. Although many other activities were offered at the Boys' Club, Albert found his greatest enjoyment in painting.

G. Marion D.

Marion, eighteen, was an epileptic whose one interest was to dance. Marion's mother who had been receiving assistance from a family agency complained to her case worker that Marion was difficult to manage and forgetful in the home. She feared that Marion's obsession with dancing would prove disastrous to the girl. The case worker talked with Marion and learned that she was taking private lessons in tap dancing from a professional dancer who resided in the community. The case worker was convinced that Marion's interest in dancing was genuine. She suggested that Marion join a dancing class at the Y.W.C.A. as a first step toward more serious study. The case worker contacted a staff member at the "Y" and secured a scholarship. Marion attended the dancing class regularly from January through August. During the summer the case worker was informed by the dancing instructor that Marion had not enough talent to make dancing a career. In her interviews with Marion the case worker began to attempt to get Marion to re-think her desire to be a dancer. Marion, no longer finding the case worker a source of encouragement for her ambition, soon stopped attending the "Y". Her mother reported to the case worker that Marion had gone back to her old dancing teacher.

The outcomes of the cases cited above can be best analysed on the basis of Miss Gertrude Wilson's observations regarding special interest groups. She says,

> While most group work agencies have special interest groups, not all of them are so constituted that they will be helpful to the individual who is still in need of an understanding leader. Some special interest groups are focused upon the individual and the leader uses the particular tool-skill, crafts, dancing, music, and so on to help the individual relate himself first to things or activities and then to people. But many such groups have their focus on the development of the skill and not on the individual, in which case it is a matter of chance whether membership in the group will be helpful or not.[1]

In the light of Miss Wilson's description of the peculiar nature of special interest groups, it is clear that referral of an individual to such groups involves greater risks than referral to other types of groups. Special interest groups are set up primarily for individuals who can relate themselves to other people. In the cases mentioned, each client had disturbances which interfered with the development of even their strongest interest. It is for this reason that Miss Wilson warns that "case workers should limit referrals to such a group (i.e. the special interest group) to those clients who appear to be quite able to put forth their own efforts for group acceptance."[2]

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1 Gertrude Wilson, Case Work and Group Work, Their Relationship and Practice (New York, N.Y., Family Welfare Association of America, 1941), pp. 67-68

2 Ibid., p. 68.

V. Group Work as a Consultive Resource

The cases in this classification are ones in which the case worker followed up on an existing contact between the client and a group work agency. In all three cases there occurred numerous contacts between case worker and group worker, all aiming at integrating the client into the program. There were other contacts between these two workers regarding such matters as camp arrangements. In one case, cooperation between case worker and group worker proceded to the point of joint conferences. In none of the cases, however, were the full effects of the group work brought to bear on the client.

H. John A.

John, nine, was brought to the Child Guidance Clinic by his mother because of school failure, disobedience, petty stealing and inability to mix with other children. Other siblings were Albert, fifteen, and Alice, eleven months. The family situation was a disturbed one. The father, an irregular provider showed little interest in the children. The mother was untidy, inadequate and completely dependent on her husband. John said he was a member of the Y.M.C.A. He was found to have an I.Q. of 107, but possessed poor manual coordination. The psychiatrist advised the case worker to support John's relationship with the Y.M.C.A. even to the extent of subsidizing his fee. It was hoped that through his association with the "Y" John might be guided in developing better relationships with other children and that he might be steered into supervised recreational activities.

The case worker's contacts with the staff members of the Y.M.C.A. confirmed John's "lone-wolf" tendencies and his social ostracism. The group worker noted however that he seemed to enjoy himself whenever he did attend. Attempt was made to have John join one of the smaller church groups that functioned in the "Y." This

> group was primarily interested in basket ball but it met only once a week. John enjoyed this activity but still had enough time on his hands to get into difficulties in the community. At the time the case study was made John was still being seen by the psychiatrist at the clinic. The relationship between case worker and group worker still continues with the aim of finding the activities that evoke a response in John.

In two other cases there existed the same pattern of relations between case work and group work agency as in the case of John. In each, the case worker reached out for the client's existing group work contact in the hope of using it as a means of treatment. In all these cases, the client's contact with the group work agency was sporadic and intermittent. In one case, the client was a disturbing factor in the group work program. In two others, the client was a withdrawn, friendless child, who didn't have the knack of making friends. In these two cases the group work agencies were large, multi-activity organizations. The other group work agency was a medium-sized settlement.

The case worker's records show that some of the diagnostic material gained in interviews with the group worker assisted in understanding the client's problem.

CHAPTER VII.

SUMMARY AND CONCLUSIONS

The material for this study was drawn from twenty cases selected from the files of four typical case work agencies in Boston. Five cases were taken from each of the following agencies:

The Boston Provident Association
The Family Society (South End District)
The Habit Clinic for Child Guidance
The Children's Hospital Social Service Department

This group of cases is a purposive sample. It does not purport to reflect the true relationships between case work and group work agencies in Boston. It serves merely to indicate what relationships may arise and what results may accrue from the cooperation between case workers and group workers.

The group of individuals studied was found to consist of twenty children and one adult. Among the twenty children there was a relatively even scatter of ages in the range between seven and fourteen years. There were twice as many boys included in this group as there were girls.

The preponderance of children in the sample may be due to the existence of greater group work opportunities for them in settlements, centers and youth agencies. Possibly the child, because of his level of development emotionally and physically, lends himself more readily to group work exper-

iences.

The types of group work agencies used in treatment depended on one or both of two factors, the individual's problem and his proximity to group work services. Wherever possible, attempts were made to use group work services in the individual's immediate neighborhood. In special cases of medical and emotional disturbances a unique type of protected group experience was offered to the clients in their own homes.

The range of individual problems in which group work has been brought to bear is rather extensive. The types of problems are:

1. home environment
2. medical
3. behavior and emotional
4. social

Cases were cited of normal individuals in an abnormally disturbed environment. There were cases of medical disorders such as cerebral palsy, epilepsy, osteomyelitis and heart diseases in which the patients derived normal socializing experience from their group work contact. In problems of emotional and behavior disturbances the use of group work necessarily depends on the adequate preparing of the individual for group life. This involves greater effort and risks because the personality of the individual is a damaged one. It was found that the referral in these cases is a hazardous matter

and should not be undertaken without thorough consideration by case worker and psychiatrist. The study further revealed that at the present, the chief method of referral is the telephone call.

The follow-up picture is particularly encouraging. Here, the case worker used telephone calls and personal visitations to the group work agency in order to discuss the progress or problems of the client. In some cases, few in number, there were no attempts at follow-up by the case worker. In most there were between two and five contacts noted in the record. Through these calls and visits, the case worker was given an insight of the problems and functions of the group work agency. In each situation the case worker seemed satisfied with the cooperation of the group worker.

Though group work made notable contributions to individual adjustment as an element in the treatment process, it proved more efficacious in the area of preventive treatment. Six of the cases studied may be classified as preventive treatment cases. In all these, group work experience was successful in warding off the individual's breakdown. In the case of Catherine, the group environment was used to offset the neurotic family environment. Agnes, disturbed and unhappy because of her mother's illicit relationships found a normal, accepting and satisfying home in the settlement. She found, too, a substitute mother who had respect for and interest in her.

On a case not discussed in this presentation, Ann also was helped to free herself from a neurotic, overprotective and overrestrictive mother by participation in group work activities. Helen, once introduced to a normal group life, forsook her seclusion and sought the company of girls her age. Willard, troubled by the loss of his father blamed his mother and regarded her with hostility. Joining a scout group gave him the opportunities for adult masculine relationship and helped modify his feelings for his mother. In another case, not cited, Jackie on the departure of his father for armed service withdrew from any social life. Because of his close ties with his father he had developed no friendships. Through the case worker's efforts, a protected group was organized for him. Under the supervision of a group leader Jackie learned how to relate himself to other boys. At the end of one year of group experience Jackie was enjoying the normal friendship of several boys his age.

The children who were referred to a group work agency as a preventive measure can be further classified. One type of referral was represented by Catherine, Agnes and Ann whose home environment contained the factors for possible maladjustment of the child. The children were otherwise free from personality disorders. The other type was represented by Helen, Willard and Jackie in whom the disturbed condition of the home was resulting in personal traits which pointed to

maladjustment.

The majority of cases where the case worker sought group work services were those in which group participation was considered by the case worker as a part of the treatment plan. Group work was found to be of assistance in situations where the child's medical condition precludes his forming normal play relationships. Group work was used successfully to this end in the cases of Thomas, Anthony, Frank (not cited) and David (not cited). In the cases of Marion and Samuel (not cited) both of whom suffered from attacks of epilepsy, the group work contact was not long enough to determine any noticeable success. In both cases the group work was of a few months duration.

In the problem of old age, group experience was found to be of inestimable value. The idea of providing group work experience for people of advanced age is a new one. It is gaining much recognition by group workers. It is hoped that such a resource will be developed in group work agencies in other areas.

The area of human problems that poses the greatest challenge to group work is that of emotional and behavior disturbances that have advanced to the point of hampering the individual's school and family life.

A listing of the symptoms of maladjustment of seven children in this study gives some clues as to the depth and

seriousness of the problems.

1. Jackie - Reading difficulty, retardation and poor school work, destructiveness.

2. Albert - Reading difficulty, retardation and poor school work, bad dreams, dizzy spells.

3. Edwin - Reading difficulty, disobedience at home, annoying attention-getting behavior at school.

4. Carl - Immature, fearful of other boys.

5. Alfred - Hyperactivity, annoying attention-getting behavior in school.

6. John - School failure, disobedience at home, no friends, petty stealing.

7. Celia - Meanness, profanity, aggressiveness and disobedience in the home.

The slight progress in Jackie's case has been noted in an earlier discussion.

Albert and Edwin were introduced to group work agencies on the basis of their special interests. In both cases the group work experience didn't adequately meet their needs. The fact that referral was made to large group work agencies which emphasize mass recreation may partially explain why the contact was not as successful as it might have been. The greatest need of these boys was individual attention by an adult male.

Carl seemingly was making a good adjustment in the activities of a settlement house when quite abruptly he stopped attending. The case worker, upon investigation, dis-

covered that Carl had been set upon by a group of older boys on his way home from the settlement. Because of this experience Carl feared to go back. Later however he joined some recreational activities sponsored by his church. He is more at home with the children who attend these activities.

The cases of Alfred, John and Celia did not involve referral. Here the case worker consulted the group worker and used the information gained in making further diagnosis of the case. In the three cases the observation of the group worker regarding the client's relations with children and adults was appreciated by the case worker.

The application of the group work process to the solution of personality disorders is in an experimental stage.

The Group Therapy movement which seeks to solve such problems by organizing case work clients in groups has made significant contributions toward this end. The movement utilized the services of specially trained case workers in leading and guiding the groups. In the field of group work, awareness of the contribution it can make to individual adjustment is of recent origin. There is an ever growing movement within the field which holds that the generic training of the group worker ought to equip him to understand the causes of emotional conflicts in the individual. The development of well trained group workers who understand individual as well as social dynamics must occur before the group work field can

enlarge its contribution in this area.

In spite of the limitations of this study, it may be safely concluded that among the social agencies in Boston, there is at the present a beginning of a case work - group work movement. This did not begin with the creation of the joint committee of the Greater Boston Community Council, but rather is reflected in it. The movement arose out of the spontaneous efforts of the case worker to meet the needs of her client. The relationships between case workers and group workers and the results in terms of human adjustment are based on the activity of the individual case worker. These case workers who on their own initiative sought out and used the service of group work have provided the basis upon which future cooperation between the two fields may be enlarged. That both fields can and are working together successfully has been amply demonstrated by this study. The time has now come when further cooperation may be carried on by joint study and planning.

Approved,

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Dean

BIBLIOGRAPHY

BOOKS

American Association of Group Workers, A Symposium on Group Work - Case Work Cooperation. New York, N.Y.; Association Press, 1946.

Hamilton, Gordon, Theory and Practice of Social Case Work. New York, N.Y.; Columbia University Press, 1940.

Tyler, Anne Johnson, Case Work and Group Work; Similarities and Differences. New York, N.Y.; Welfare Council of New York City, 1941.

Welfare Council of New York City, The "Pairs" Experiment. Prepared by Committee on Group Work - Case Work Relationships. New York, N.Y. 1940.

Wilson, Gertrude, Group Work and Case Work, Their Relationship and Practice. New York, N.Y.; Family Welfare Association of America, 1941.

PERIODICALS

Conover, Merrill B., "The Joint Use of Group Work and Case Work Techniques," The Family, 23;264-274, November, 1942.

Berlatsky, Emmanuel, "An Experiment in the Utilization of Group Work and Case Work Technique in a Group," Proceedings of the National Conference of Jewish Social Service, 1937. pp. 48-50.

Bernstein, Saul, "Contributions of Group Work to Individual Adjustment," The Family, 20:21-23.

Coyle, Grace L., "Social Group Work," Social Work Year Book, 1937. p. 461.

De Schweinitz, Elizabeth McCord, "Can We Define Social Case Work?", Midmonthly Survey, LXXV, (February, 1939), pp. 37-39.

Erlen, A. W., "The Implication of a Relationship Between a Group Work Agency and a Case Work Agency," Proceedings of the National Conference of Jewish Social Service, 1937. pp. 48-50

Greving, Frank T., "Group - Treatment Potentialities in An Authoritative Setting," Mental Hygiene, 31:397-408, July, 1947.

Hester, Mary, and Dorothy Good Thomas, "Case Work - Group Work Cooperation," Proceedings of the National Conference of Social Work. 1939. pp. 334-341.

Linderman, Wanda Taylor, "An Experiment in Case Work - Group Work Cooperation," The Group, 8:11-13, November, 1945.

Newstetter, W. I., "What is Social Group Work?", Proceedings National Conference of Social Work, 1935, p. 291.

Scheidlinger, Saul, "Patterns of Case Work Service in Group Work Agencies," The Group, 8:1-7, November, 1945.

Sorenson, Ray, "Case Work and Group Work Integration: Its Implication for Community Planning," Proceedings of the National Conference of Social Work, 1935, pp. 311-316.

Wanamaker, Claudia, "The Integration of Group Work and Case Work," Proceedings of the National Conference of Social Work, 1935, pp. 300-310.

Wilson, Gertrude, "Interplay of the Insights of Case Work and Group Work," Proceedings of the National Conference of Social Work, 1935. pp. 150-162.

Wren, Jean, "Group Work in a Case Work Setting," The Group, 8:8-11, November, 1945

APPENDIX

Date_____

SCHEDULE

for
Case Work Record

1. Agency_____ Case No._____

2. Date of intake_____ Date of Close_____

3. The Client (or patient)
   Date of birth_____ Sex_____ Grade_____

   Marital Status_____ Occupation_____

   Parents

   Siblings

   Environment

4. The Client's Problem:

_____ (Ex)

CONFIDENTIAL

(1)
(Please type or print)

1. Name: _____ Date: _____

2. Date of Birth: _____ Place of Birth: _____

3. The Client (or Patient)
Date of Birth _____ Sex _____ Grade _____
Marital Status _____ Occupation _____

Address

Phone

Relationship

4. The Client's Employer

5. When did case worker bring group work into the case?

6. Why was particular group work agency chosen

Proximity? For program? Client's choice? Other?

7. Was there pre-referral contact with group work agency?

8. Pre-referral interpretation with client? parents? both?

9. Date of referral to group work agency

10. Method used by case worker
    - telephone
    - letter
    - conference
    - other

11. How was group work intake performed?

4. Does one need special rules when work into the event?

5. Did you participate group more agency review
   (feasibility) for structure client's counselor client

6. Did group or individual consult with group more support?

8. Interpersonal interpretation with client? personal bound

9. Have it related to group more agency?

10. Defined need in main motive
    telephone
    letter
    home visits
    other

11. Did you group more future continued?

12. Calls, visits, conferences with group worker during treatment

13. What areas of responsibility were defined by the two agencies?

14. What were the objectives of the referral?

15. Was client aware that two agencies were cooperating?

16. Summary of Client's group work experience

Date of enroll. in agency_____ Date of leaving_____

Type of group_____ Meetings per wk._____

" _____ " _____

" _____ " _____

" _____ " _____

Attendance at other group work events

17. Relation of client to other members

15. Does anyone know the whereabouts of the [illegible]?

16. Was client asked that her [illegible] were concerned?

18. Summary of client's group work activities

Date of enroll. in agency_____Date of leaving_____

Type of group_____ Functions for us._____

_____ _____

_____ _____

_____ _____

Attendance at other group work events

17. Relation of client to other members

18. Relation to staff or leader

19. Client's participation in group activities

20. Group worker's evaluation of client's group experience

21. What use did the case worker make of group work?

    1. At recreation

    2. For further diagnosis

    3. As treatment agent

12. Attention to staff on leave

13. Client's participation in group activities

14. Group worker's evaluation of client's group experience

15. What use did the case worker make of group work:

1. At reception

2. For further diagnosis

3. At treatment agent

22. Case worker's evaluation of client's group work experience for success or failure.

23. Attitude of case worker toward group worker

Was there an understanding of each other's function?